



2015 – 2016  
**ARIZONA HIGHLY QUALIFIED ATTESTATION FORM**  
**READING SPECIALIST (Interventionist)**  
**GRADES K-8; GRADES 6-12; GRADES K-12**

*(Pursuant to requirements mandated by P.L. 107-110 No Child Left Behind Legislation)*  
To be completed by reading specialist, reading consultant, remedial reading teacher, reading interventionist, or teachers in a similar position, in Grades K-12 to verify Highly Qualified status.

Name:		SSN (last 4 digits):	
School:		LEA:	
Teacher Work Email:		School Employment Start Date (mm/yyyy) (Date of Hire):	

1. Holds a bachelor's degree or a more advanced degree from an accredited institution.

**AND**

2. Holds a valid Arizona teaching certificate (A.R.S. §15-502.B) – Provisional, Reciprocal, or Standard (Charter school teachers are exempt from this requirement)

- a. ☐ Early Childhood Certificate (K-3 only)
- b. ☐ Elementary Certificate
- c. ☐ Secondary Certificate
- d. ☐ Special Education Certificate (List Disability Area(s): \_\_\_\_\_)

**AND**

3. Teaching Assignment: Reading Specialist (Interventionist) \_\_\_\_\_

# Periods taught in this Core Content Area

- ☐ Meets the requirements for the Reading Specialist Endorsement – appropriate for grade level: Grades K-8; Grades 6-12; Grades K-12

If you met the requirements for 1, 2, **and** 3 under federal guidelines, you are considered **Highly Qualified**.

☐ **Highly Qualified Teacher**

☐ **Non-Highly Qualified Teacher**

I attest to the factual completion of this evaluation.

\_\_\_\_\_  
Signature of Teacher

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Principal

\_\_\_\_\_  
Signature of Principal

\_\_\_\_\_  
Date